

# APPLICATION FOR LICENSE TO MARRY

PLEASE PRINT OR WRITE LEGIBLY

(Regular Application \$56.00)

ID VERIFIED: \_\_\_\_\_



Marriage license is valid for ninety (90) days after it is issued. Are you getting married within the next ninety (90) days? Yes \_\_\_ No \_\_\_

| GROOM'S PERSONAL DATA   |  | BRIDE'S PERSONAL DATA   |                    |
|---|--|---|--------------------|
| First Name:   |  | First Name:   |                    |
| Middle Name:  |  | Middle Name:  |                    |
| Last Name:  |  | Last Name:  |                    |
|   |  | Maiden Last Name, if different:   |                    |
| Date of Birth:  |  | Date of Birth:  |                    |
| State of Birth:   |  | State of Birth:   |                    |
| Groom's Address:  |  | Bride's Address:  |                    |
| City: ZIP:  |  | City: ZIP:  |                    |
| County/State/Country  |  | County/State/Country  |                    |
| Mailing Address (if different number & street)  |  | Mailing Address (if different number & street)  |                    |
| City: ZIP:  |  | City: ZIP:  |                    |
| County:   |  | County:   |                    |
| Number of Previous Marriages  |  | Number of Previous Marriages  |                    |
| Last Marriage Ended by: (circle one)<br>DEATH, DISSOLUTION OR ANNULMENT                       |  | Last Marriage Ended by: (circle one)<br>DEATH, DISSOLUTION OR ANNULMENT                       |                    |
| Date Last Marriage Ended:   |  | Date Last Marriage Ended:   |                    |
| Occupation:   |  | Occupation:   |                    |
| Business Type:  |  | Business Type:  |                    |
| Education, Total Years Completed:   |  | Education, Total Years Completed:   |                    |
| Father's Full Name:   |  | Father's Full Name:   |                    |
| State of Birth:   |  | State of Birth:   |                    |
| Mother's Full Name: (maiden)  |  | Mother's Full Name: (maiden)  |                    |
| State of Birth:   |  | State of Birth:   |                    |
| Do you need to re-register to vote because of a name change or address change? Yes ___ No ___ |  | Do you need to re-register to vote because of a name change or address change? Yes ___ No ___ |                    |
| AFFIDAVIT   | WE THE UNDERSIGNED, AN UNMARRIED MAN AND UNMARRIED WOMAN, STATE THAT THE FOREGOING INFORMATION IS CORRECT AND TRUE TO THE BEST OF OUR KNOWLEDGE AND BELIEF. THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR TO THE ISSUANCE OF A LICENSE IS KNOWN TO US, AND HEREBY APPLY FOR A LICENSE AND CERTIFICATE OF MARRIAGE. |   |                    |
|   | SIGNATURE OF GROOM   |   | SIGNATURE OF BRIDE |

GROOM: Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Date \_\_\_\_\_

BRIDE: Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Date \_\_\_\_\_